

ARTICLE 1. ADMINISTRATION

R4-23-110. Definitions

In addition to definitions in A.R.S. § 32-1901, the following definitions apply to A.A.C. Title 4 Chapter 23:

"Verified signature" or "signature verifying" means in relation to a Board license or permit application or report, form, or agreement, the hand-written or electronic signature of an individual who by placing their hand-written or electronic signature on a hard-copy or electronic license or permit application or report, form, or agreement agrees with and verifies that the statements and information within or attached to the license or permit application or report, form, or agreement are true in every respect and understand that inaccurate reporting can result in denial or loss of a license or permit or report, form, or agreement.

ARTICLE 2. PHARMACIST LICENSURE

R4-23-205. Fees

A. Licensure fees:

1. No change
 - a. No change
 - b. No change
2. Pharmacy or graduate intern:
 - a. Initial licensure: \$50.
 - b. ~~Licensure renewal: \$50.~~
3. No change
 - a. No change
 - b. No change
4. No change

B. No change

C. No change

D. No change

1. No change
2. No change
 - a. No change
 - b. No change
 - c. No change
3. No change
4. No change
 - a. No change
 - b. No change
5. No change
6. No change

E. No change

1. No change
 - a. No change

- b. No change
 - c. No change
 - d. No change
- 2. No change
- 3. No change
- F.** No change
- G.** No change
 - 1. No change
 - 2. No change

ARTICLE 3. INTERN TRAINING AND PHARMACY INTERN PRECEPTORS

R4-23-301. Intern Licensure

- A.** No change
- B.** No change
 - 1. No change
 - 2. No change
 - 3. No change
 - 4. No change
- C.** No change
- D.** No change
 - 1. No change
 - 2. No change
 - 3. No change
- E.** No change
- F.** No change
 - 1. No change
 - 2. No change
- G.** No change
- H.** No change
 - 1. No change
 - 2. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change
 - e. No change
 - f. No change
 - g. No change
 - h. No change
- I.** No change
- J.** License renewal. A pharmacy intern shall remain in good standing by payment of the biennial renewal fee specified in R4-23-205. A pharmacy intern whose license expires before the intern completes the education or training required for licensure as a pharmacist

but less than six years after the issuance of the initial pharmacy intern license may renew the intern license for a period equal to the difference between the expiration date of the initial intern license and six years from the issue date of the initial intern license by payment of a prorated renewal fee based on the initial license fee specified in R4-23-205. If a pharmacy intern fails to graduate from a Board-approved college or school of pharmacy within six years from the date the Board issues the initial intern license, the intern is not eligible for relicensure as an intern unless the intern obtains Board approval as specified in A.R.S. § 32-1923(E). To remain in good standing, an intern who receives Board approval for relicensure shall pay a prorated renewal fee for the number of months of licensure approved by the Board based on the initial license fee specified in R4-23-205 before the license expiration date. If the biennial renewal fee is not paid by November 1 of the renewal year specified in A.R.S. § 32-1925 an intern receives Board approval for relicensure and does not pay the renewal fee specified in this subsection before the license expiration date, the intern license is suspended and the licensee shall pay a penalty as provided in A.R.S. § 32-1925 to vacate the suspension.

- K.** No change
1. No change
 2. No change

ARTICLE 4. PROFESSIONAL PRACTICES

R4-23-408. Computer Records

A. Systems manual. A pharmacy permittee or pharmacist-in-charge shall:

1. Develop, and implement, and comply with policies and procedures for the following operational aspects of a computer system:
 - a. No change
 - b. No change
 - c. No change
 - d. No change
 - e. No change
2. No change
3. No change
4. No change
5. No change

- B.** No change
1. No change
 2. No change
 3. No change
 4. No change
 5. No change
 - a. No change
 - b. No change
 - c. No change

- d. No change
 - e. No change
 - f. No change
- 6. No change
- C. No change
 - 1. No change
 - 2. No change
 - 3. No change
 - 4. No change
 - a. No change
 - i. No change
 - ii. No change
 - iii. No change
 - b. No change
 - i. No change
 - ii. No change
 - iii. No change
- D. No change
- E. No change
- F. No change
 - 1. No change
 - 2. No change
- G. No change
 - 1. No change
 - 2. No change
- H. Prescription records and retention.
 - 1. No change
 - a. No change
 - b. No change
 - 2. In lieu of filing the actual original hard-copy prescription, a pharmacy permittee or pharmacist-in-charge may use an electronic imaging recordkeeping system, if:
 - a. No change
 - b. No change
 - c. No change
 - d. Policies and procedures for the use of an electronic imaging recordkeeping system are developed, and implemented, reviewed, and revised in the same manner described in subsection (A) and complied with in the same manner as specified in subsection (A); and
 - e. No change
 - 3. No change

ARTICLE 6. PERMITS AND DISTRIBUTION OF DRUGS

R4-23-610. Community Pharmacy Personnel and Security Procedures

- A. No change
 - 1. No change
 - 2. The pharmacist-in-charge shall:
 - a. Ensure that all pharmacy policies and procedures required under 4 A.A.C. 23 are prepared, ~~and implemented, and complied with~~;
 - b. No change
 - c. No change
 - d. No change
 - e. No change
- B. No change
 - 1. No change
 - 2. No change
- C. No change
- D. No change
- E. No change
- F. No change
- G. No change
 - 1. No change
 - 2. No change

R4-23-611. Pharmacy Facilities

- A. No change
 - 1. No change
 - 2. No change
 - a. No change
 - b. No change
 - 3. No change
 - 4. No change
 - a. No change
 - b. No change
 - 5. No change
 - 6. No change
 - 7. No animals, except ~~guide dogs for the blind~~ licensed assistant animals and ~~guard dogs~~ animals, are allowed in the pharmacy;
 - 8. No change
 - 9. No change
- B. Supply of drugs and chemicals. A pharmacy permittee or pharmacist-in-charge shall ensure that:
 - 1. No change
 - a. No change
 - b. No change
 - 2. No change
 - 3. Policies and procedures are developed, ~~and implemented, and complied with~~ to prevent the sale or use of a drug or chemical:

- a. No change
- b. No change
- c. No change
- d. No change
- e. No change
- 4. No change
 - a. No change
 - b. No change
 - i. No change
 - ii. No change
 - iii. No change

R4-23-653. Personnel: Professional or Technician

A. Each hospital pharmacy shall be directed by a pharmacist who is licensed to engage in the practice of pharmacy in Arizona and is referred to as the Director of Pharmacy. The Director of Pharmacy shall be the pharmacist-in-charge, as defined in A.R.S. § 32-1901 or shall appoint a pharmacist-in-charge. The Director of Pharmacy and the pharmacist-in-charge, if a different individual, shall:

- 1. No change
- 2. Ensure that the policies and procedures required by these rules are prepared, ~~and~~ implemented, and complied with;
- 3. No change
- 4. No change
- 5. No change
- 6. No change

B. No change

C. No change

D. No change

E. No change

- 1. No change
 - a. No change
 - b. No change
- 2. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change
- 3. No change
- 4. No change
- 5. No change
- 6. No change
- 7. No change
- 8. No change
- 9. No change

- 10. No change
- 11. No change
- 12. No change
- 13. No change
- 14. No change
- F. No change
- G. No change
- H. No change
 - 1. No change
 - 2. No change
 - a. No change
 - b. No change
- I. No change
- R4-23-654. Absence of Pharmacist**
- A. No change
- B. No change
- C. No change
- D. Remote drug storage area. The Director of Pharmacy or pharmacist-in-charge shall, in consultation with the appropriate committee of the hospital:
 - 1. No change
 - 2. Develop, ~~and implement, review, and revise in the same manner described in R4-23-653(A) and comply with~~ policies and procedures ~~in the same manner described in R4-23-653(A)~~ that ensure proper storage, access, and accountability for drugs in a remote drug storage area.
- E. No change
 - 1. The Director of Pharmacy or pharmacist-in-charge shall, in consultation with the appropriate committee of the hospital, develop, ~~and implement, review, and revise in the same manner described in R4-23-653(A) and comply with~~ policies and procedures ~~in the same manner described in R4-23-653(A)~~ to ensure that access to the hospital pharmacy during the pharmacist's absence conforms to the following requirements:
 - a. No change
 - b. No change
 - c. No change
 - d. No change
 - 2. No change
 - a. No change
 - i. No change
 - ii. No change
 - iii. No change
 - iv. No change
 - b. No change
 - c. No change
 - d. No change

3. No change

R4-23-657. Security

- A.** No change
1. No change
 2. No change
 3. No change
- B.** Prescription blank security. The Director of Pharmacy shall develop, ~~and implement,~~ review, and revise in the same manner described in R4-23-653(A) and comply with policies and procedures ~~in the same manner described in R4-23-653(A)~~ for the safe distribution and control of prescription blanks bearing identification of the hospital.

R4-23-658. Drug Distribution and Control

- A.** General. The Director of Pharmacy or pharmacist-in-charge shall in consultation with the medical staff, develop, ~~and implement,~~ review, and revise in the same manner described in R4-23-653(A) and comply with written policies and procedures ~~in the same manner described in R4-23-653(A)~~ for the effective operation of a drug distribution system that optimizes patient safety.
- B.** No change
1. No change
 2. No change
 3. No change
- C.** No change
1. No change
 2. No change
- D.** No change
1. No change
 - a. No change
 - i. No change
 - ii. No change
 - iii. No change
 - b. No change
 - i. No change
 - ii. No change
 - iii. No change
 - iv. No change
 - c. No change
 - i. No change
 - ii. No change
 - iii. No change
 - iv. No change
 - v. No change
 - vi. No change
 - vii. No change
 - viii. No change

2. No change
- E. Controlled substance accountability. A Director of Pharmacy or pharmacist-in-charge shall ensure that effective policies and procedures are developed, and implemented, reviewed, and revised in the same manner described in R4-23-653(A) and complied with in the same manner described in R4-23-653(A) regarding the use, accountability, and recordkeeping of controlled substances in the hospital, including the use of locked storage areas when controlled substances are stored in patient care areas.
- F. Emergency services dispensing. If a hospital permits dispensing of drugs from the emergency services department when the pharmacy is unable to provide this service, the Director of Pharmacy, in consultation with the appropriate department personnel and medical staff committee shall develop, and implement, review, and revise in the same manner described in R4-23-653(A) and comply with written policies and procedures ~~in the same manner described in R4-23-653(A)~~ for dispensing drugs for outpatient use from the hospital's emergency services department. The policies and procedures shall include the following requirements:
 1. No change
 2. No change
 3. No change
 4. No change
 5. No change
 6. No change
 7. No change

R4-23-659. Administration of Drugs

- A. Self-administration. A hospital shall not allow self-administration of medications by a patient unless the Director of Pharmacy or pharmacist-in-charge, in consultation with the appropriate department personnel and medical staff committee, develops, and implements, reviews, and revises in the same manner described in R4-23-653(A) and complies with policies and procedures for self-administration of medications by a patient ~~in the same manner described in R4-23-653(A)~~. The policies and procedures shall specify that self-administration of medications, if allowed, occurs only when:
 1. No change
 2. No change
- B. Drugs brought in by a patient. If a hospital allows a patient to bring a drug into the hospital and before a patient brings a drug into the hospital, the Director of Pharmacy or pharmacist-in-charge shall, in consultation with the appropriate department personnel and medical staff committee, develop, and implement, review, and revise in the same manner described in R4-23-653(A) and comply with policies and procedures for a patient-owned drug brought into the hospital ~~in the same manner described in R4-23-653(A)~~. The policies and procedures shall specify the following criteria for a patient-owned drug brought into the hospital:
 1. No change
 - a. No change
 - b. No change

2. No change
 - a. No change
 - b. No change
- C. Drug samples. The Director of Pharmacy or pharmacist-in-charge is responsible for the receipt, storage, distribution, and accountability of drug samples within the hospital, including developing, and implementing, reviewing, and revising in the same manner described in R4-23-653(A) and complying with specific policies and procedures ~~in the same manner described in R4-23-653(A)~~ regarding drug samples.

R4-23-671. General Requirements for Limited-service Pharmacy

- A. No change
- B. No change
 1. No change
 2. No change
 3. No change
 4. No change
- C. No change
- D. No change
- E. Before dispensing from a limited-service pharmacy, the limited-service pharmacy permittee or pharmacist-in-charge shall:
 1. Prepare, ~~and implement, and comply with~~ written policies and procedures for pharmacy operations and drug dispensing and distribution,
 2. No change
 3. No change
 4. No change
 5. No change

R4-23-675. Limited-service Sterile Pharmaceutical Products Pharmacy

- A. No change
- B. No change
- C. No change
- D. No change
- E. The limited-service pharmacy permittee or the pharmacist-in-charge shall ensure development, ~~and implementation, review and revision in the same manner described in R4-23-671(E) and compliance with~~ ~~of~~ policies and procedures for pharmacy operations, including pharmaceutical product compounding, dispensing, and distribution, that comply with the requirements of R4-23-402, R4-23-410, R4-23-670, and R4-23-671.
- F. No change

R4-23-682. Limited-service Nuclear Pharmacy

- A. No change
- B. No change
 1. No change
 - a. No change
 - b. No change
 - c. No change

- 2. No change
- 3. No change
- C.** No change
 - 1. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change
 - 2. No change
- D.** No change
- E.** No change
 - 1. No change
 - a. No change
 - b. No change
 - c. No change
 - 2. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change
 - e. No change
 - f. No change
 - g. No change
 - 3. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change
 - e. No change
 - f. No change
 - g. No change
 - h. No change
- F.** No change
 - 1. No change
 - a. No change
 - b. No change
 - c. No change
 - 2. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change

- e. Prescription balance, Class A, and weights or an electronic balance of equal or greater accuracy;
 - f. No change
 - g. No change
 - h. No change
 - ~~i.~~ ~~Equipment to produce a typed or mechanically printed label;~~
 - ~~j.~~ ~~Equipment to produce mechanically printed numbers;~~
 - ~~k.i.~~ No change
 - ~~l.j.~~ No change
 - ~~m.k.~~ No change
 - ~~n.l.~~ No change
 - ~~o.m.~~ No change
- 3. No change
- 4. No change
 - a. No change
 - b. No change
 - c. No change
- 5. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change
 - e. No change
 - f. No change
- G.** The pharmacist-in-charge of a limited-service nuclear pharmacy shall prepare, and implement, review, and revise in the same manner described in R4-23-671(E) and comply with written policies and procedures for pharmacy operations and drug distribution.
- H.** No change
 - 1. No change
 - 2. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change
 - e. No change
 - 3. No change
 - 4. No change
 - 5. No change
 - 6. No change
 - 7. No change
 - 8. No change
 - 9. No change
 - a. No change

- b. No change
- c. No change
- d. No change
- e. No change
- f. No change
- g. No change
- h. No change
- 10. No change
- 11. No change
- 12. No change
- 13. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change
 - e. No change
- 14. No change

ARTICLE 7. NON-PHARMACY LICENSED OUTLETS - GENERAL PROVISIONS

R4-23-701. Long-term Care Facilities Pharmacy Services: Consultant Pharmacist

- A.** The long-term care consultant pharmacist as defined in R4-23-110, in cooperation with the pharmacist-in-charge of a provider pharmacy shall:
- 1. Prepare, implement, review, and revise in the same manner described in R4-23-671(E) and comply with written policies and procedures for the safe and efficient receipt, distribution, and storage of pharmaceutical products by the long-term care facility ~~in the manner specified in R4-23-671(E);~~
 - 2. No change
 - 3. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change
 - i. No change
 - ii. No change
 - iii. No change
 - iv. No change
 - e. No change
 - f. No change
 - g. No change
 - h. No change
 - i. No change
 - j. No change
 - k. No change

- l. No change
 - m. No change
- B.** No change
 - 1. No change
 - 2. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change
 - e. No change
 - f. No change
 - 3. No change
 - 4. No change
 - 5. No change
 - a. No change
 - b. No change
- C.** No change
 - 1. No change
 - 2. No change
 - 3. No change
 - 4. No change
- D.** No change
 - 1. No change
 - a. No change
 - b. No change
 - c. No change
 - 2. No change
 - a. No change
 - b. No change

R4-23-701.02. Long-term Care Facilities Pharmacy Services: Emergency Drugs

- A.** No change
- B.** No change
 - 1. No change
 - 2. No change
- C.** No change
 - 1. No change
 - a. No change
 - b. No change
 - 2. No change
 - 3. No change
 - 4. No change
- D.** The limited-service pharmacy permittee or pharmacist-in-charge of a provider pharmacy shall:

1. Prepare, ~~and implement, review, and revise in the same manner described in R4-23-671(E) and comply with~~ written policies and procedures for the storage and use of an emergency drug supply unit in a long-term care facility ~~in the manner specified in R4-23-671(E);~~;
2. Make the policies and procedures available in the provider pharmacy and long-term care facility for employee reference and inspection by the Board or its designee; and
3. No change
 - a. No change
 - i. No change
 - ii. No change
 - iii. No change
 - b. No change
 - i. No change
 - ii. No change
 - iii. No change
 - iv. The provider pharmacy's personnel restock the emergency drug supply unit within 48 hours of receiving the notification required in subsection (D)(3)(b)(ii), and
 - c. Security and inspection procedures; and
4. No change

ARTICLE 11. PHARMACY TECHNICIANS

R4-23-1104. Pharmacy Technicians and Pharmacy Technician Trainees

- A.** No change
 1. No change
 2. No change
 3. No change
 4. No change
 5. No change
 6. No change
 7. No change
 8. No change
- B.** No change
 1. No change
 2. No change
- C.** No change
- D.** No change
- E.** Before employing a pharmacy technician or pharmacy technician trainee, a pharmacy permittee or pharmacist-in-charge shall develop, ~~and implement, review, and revise in the same manner described in R4-23-653(A) and comply with~~ policies and procedures ~~in the same manner described in R4-23-653(A)~~ for pharmacy technician and pharmacy technician trainee activities as specified in subsection (F).
- F.** No change

1. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change
 - e. No change
 - f. No change
 - i. No change
 - ii. No change
 - g. No change
 - h. No change
 - i. No change
2. No change
 - a. No change
 - i. No change
 - ii. No change
 - iii. No change
 - iv. No change
 - v. No change
 - vi. No change
 - b. No change
 - i. No change
 - ii. No change
 - iii. No change
 - iv. No change
 - v. No change
 - vi. No change
 - vii. No change
 - viii. No change
 - ix. No change
3. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change

R4-23-1105. Pharmacy Technician Training Program

- A. No change
- B. Pharmacy technician training program.
 1. A pharmacy permittee or pharmacist-in-charge shall develop, ~~and implement,~~ review, and revise in the same manner described in R4-23-653(A) and comply with in the ~~same manner described in R4-23-653(A)~~ a pharmacy technician training program based on the needs of the individual pharmacy;
 2. No change

- a. No change
 - b. No change
 - c. No change
- 3. No change
 - a. No change
 - b. No change
 - c. No change
 - d. No change
- C. Drug compounding training program.**
 - 1. A pharmacy permittee or pharmacist-in-charge shall develop, ~~and implement,~~ review, and revise in the same manner described in R4-23-653(A) and comply with ~~in the same manner described in R4-23-653(A)~~ a drug compounding training program based on the needs of the individual pharmacy;
 - 2. No change
 - a. No change
 - b. No change
 - c. No change
 - i. No change
 - ii. No change
 - iii. No change
 - iv. No change
 - v. No change
 - 3. A pharmacist-in-charge shall:
 - a. Document a pharmacy technician's progress throughout the training program, ~~and~~
 - b. Date and sign a statement attesting that a pharmacy technician ~~trainee~~ has successfully completed the training program, and
 - c. No change
- D. No change**